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PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006.	OMB 0651-0032
I C Data to and Trademant Office, II C DEDARTMENT	OF COMMEDIC

Under the Paperwork Reduct	tion Act of 1	995, no person are i	equired to	respond to a collection	on of informa	tion unless it display	s a valid OMB	control number.		
Effective on 12/08/2004.			Complete if Known Application Number 09/885,318-Conf. #4595							
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).										
FEE TRANSMITTAL			Filing Date		June 19, 2001					
For FY 2005		First Named Inv		Yasushi Hara A. Bello						
					2633					
Applicant claims small entity status. See 37 CFR 1.27			74t Offic							
TOTAL AMOUNT OF PAYM	MENI	(\$) 1,720.0	JU	Attorney Docket	No.	W11912.0023				
METHOD OF PAYMENT (check all that apply)										
Check X Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 50-2215 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17										
FEE CALCULATION										
1. BASIC FILING, SEARCH										
	FIL	ING FEES Small Entity	SEA	ARCH FEES Small Entity	EXAMI	NATION FEES Small Entity				
Application Type	Fee (\$)	Fee (\$)	<u>Fee (\$</u>	Fee (\$)	Fee (\$)		Fees P	aid (\$)		
Utility	300	150	500	250	200	100	-			
Design	200	100	100	50	130	65				
Plant	200	100	300	150	160	80				
Reissue	300	150	500	250	600	300				
Provisional	200	100	0	0	0	0				
2. EXCESS CLAIM FEES							Fee (\$)	Small Entity Fee (\$)		
Fee Description Each claim over 20 (includi	na Daissu	uac)					50	25		
Each independent claim over	_	•					200	100		
Multiple dependent claims	, 5 (m.e.a	amg revioussy					360	180		
Total Claims Extra (Claims	Fee (\$)	Fee f	Paid (\$)	N	/lultiple Depende	ent Claims			
6 - 20 = 0		50.00		.00	_		Fee Paid (\$	1		
<u>Indep. Claims</u> Extra (Claims	Fee (\$)	Fee F	Paid (\$)			<u></u> .	-		
4 -3= 1	×		20	0.00						
3. APPLICATION SIZE FEE							•			
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer										
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets Ex	tra Sheets	Number		dditional 50 or fra	ction there		<u>Fee F</u>	'aid (\$)		
- 100 =		/50		(round up to a who	ole number) ×	Eees l	Paid (\$)		
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)										
Other (e.g., late filing surpharge): 1253 Extension for response within third month 1,020.00										
		1401\ Notice	of∖appe	al			50	0.00		
SUBMITTED BY	7. 1		<u> </u>							
Signature VIII	Out	/]/ Ald	son	Registration No. (Attorney/Agent)	34,425	Telephone	(212) 89	6-5472		
Name (Print/Type) Michael J	. Scheer					Date	February [*]	18, 2005		
		7			$\Lambda \Lambda \Lambda$					
I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV239640760US, in an envelope addressed to: MS AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown										
below. Dated: February 18, 2005 Signature: Washington, School (Michael J. Schoer)										